## (DDD000034742

(Requestor's Name)						
D & D Marine Services, LLC. P.O. Box 880456 Boca Raton, FL. 33488-0456						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(						
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HLM



## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited	d liability company is:	D & D Marir	ne Services,LLC	<u> </u>		·
2. The mailing address of				-		
Boca Raton, FL. 33488						
12/23/2002			L02000034742			
3. Date of filing/registrati	on in Florida	4.	Document numb	ber		
5. The name of the registe Florida Department of S	State:		dress as shown or	the records of	the	
	David H. Tay		<del></del>			
	9545 Wyom	Name ning Ct.	,	<b>7</b> .0	0	
Address Boca Raton, FL. 33434-2728					04 DEC -1	77)
	City,	, State and Zip		7	1	- Birexan
6. The name and address of	of the new registered a	gent and/or offi	ice:	er (j.		П
Donald A. Fry					PH 5: 1	
	9345 South	Name nampton PL			<del>:</del> 3	
•	Florida street address	s (P.O. Box NC	T acceptable)			
	Boca Rator	n, <sub>FL</sub> 33434				
	City, S	State and Zip				
If the limited liability com confirmed that after the ch and the business office of liability company, it is her the members of the limited the operating agreement of	ange or changes are m	nade, the Florida ill be identical	a street address of Or in the case of	f the registered	offic ted	
(Signature of a member or authorize	ed representative of a member	er) .	1.2	-*-		
Donald A. Fry						
(Printed or typed name of signee)			. , -			
I hereby accept the appoing comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm			to act in this cape and complete per n as registered as reflect a change i been notified in t	acity. I further formance of m ent as provided n the registered writing of this d	agre y dut d for d offi chang	e to ies, in ce ge.
(Signature of Registered Agent)	/1/28	3/04				

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99) FILING FEE: \$25.00